

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In Re Application of: SCHIAFFONATI et al.

Art Unit: 1646

Application No.: 10/583,370

Conf. No. 8192

Examiner: P. M. Mertz

Filed: June 18, 2007

Washington, D.C.

For: USE OF IL-6 IN LIVER INJURY

Atty.'s Docket: SCHIAFFONATI=1

Date: April 1, 2010

Honorable Commissioner for Patents
U.S. Patent and Trademark Office
Customer Service Window
Randolph Building, Mail Stop **Amendment**
401 Dulany Street
Alexandria, VA 22314

Sir:

Transmitted herewith is a [XX] Supplemental Amendment [] _____

in the above-identified application.

[] Small Entity Status: Applicant(s) claim small entity status. See 37 C.F.R. §1.27.

[XX] No additional fee is required.

[] The fee has been calculated as shown below:

(Col. 1)			(Col. 2)		(Col. 3)	SMALL ENTITY		OR	OTHER THAN SMALL ENTITY	
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSLY PAID FOR	PRESENT EXTRA EQUALS	RATE	ADDITIONAL FEE	RATE		ADDITIONAL FEE	
TOTAL	* 19	MINUS	** 34	0	x 26	\$	x 52	\$		
INDEP.	* 3	MINUS	*** 5	0	x 110	\$	x 220	\$		
FIRST PRESENTATION OF MULTIPLE DEP. CLAIM					+ 195	\$	+ 390	\$		
					ADDITIONAL FEE TOTAL	\$	OR	TOTAL	\$	

* If the entry in Col. 1 is less than the entry in Col. 2, write "0" in Col. 3.

** If the "Highest Number Previously Paid for" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid for" IN THIS SPACE is less than 3, write "3" in this space.

The "Highest Number Previously Paid For" (total or independent) is the highest number found from the equivalent box in Col. 1 of a prior amendment of the number of claims originally filed.

[XX] Conditional Petition for Extension of Time

If any extension of time for a response is required, applicant requests that this be considered a petition therefor.

[] It is hereby petitioned for an extension of time in accordance with 37 CFR 1.136(a). The appropriate fee required by 37 CFR 1.17 is calculated as shown below:

Small Entity		Other Than Small Entity	
Response Filed Within		Response Filed Within	
[] First	- \$ 65.00	[] First	- \$ 130.00
[] Second	- \$ 245.00	[] Second	- \$ 490.00
[] Third	- \$ 555.00	[] Third	- \$ 1110.00
[] Fourth	- \$ 865.00	[] Fourth	- \$ 1730.00
Month After Time Period Set		Month After Time Period Set	

[] Less fees (\$_____) already paid for ____ month(s) extension of time on _____.

[] Please charge my Deposit Account No. 02-4035 in the amount of \$_____.

[] Credit Card Payment Form, PTO-2038, is attached, authorizing payment in the amount of \$_____.

[] A check in the amount of \$_____ is attached (check no.).

[XX] The Commissioner is hereby authorized and requested to charge any additional fees which may be required in connection with this application or credit any overpayment to Deposit Account No. 02-4035. This authorization and request is not limited to payment of all fees associated with this communication, including any Extension of Time fee, not covered by check or specific authorization, but is also intended to include all fees for the presentation of extra claims under 37 CFR §1.16 and all patent processing fees under 37 CFR §1.17 throughout the prosecution of the case. This blanket authorization does not include patent issue fees under 37 CFR §1.18.

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